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TO:	USPTO	FROM:	Richard Girards
COMPANY:		PAGES:	14, including cover
FAX:	(571) 273-8300	DATE:	September 28, 2005
PHONE:		CC:	

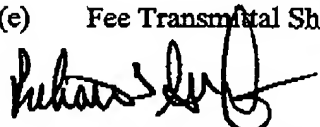
**CORRESPONDENCE REGARDING
UNITED STATES PATENT APPLICATION NO.
10/779,369**

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CERTIFICATE OF TRANSMISSION

Regarding United States Patent Application No. 10/779,369 (filed 13 February 2004), I hereby certify that items (a) and (b) and (c) and (d) and (e) listed below are being transmitted to the United States Patent & Trademark Office via facsimile ((571) 273-8300) on 28 September 2005:

- (a) Associate Power of Attorney Pursuant to 37 C.F.R. § 1.32(b) by Attorney of Record (1 page)
- (b) Petition for Extension of Time under 37 C.F.R. § 1.136(a) (1 page)
- (c) PTO-2038 (related to Petition for Extension of Time under 37 C.F.R. § 1.136(a)) (1 page)
- (d) Amendment Under 37 C.F.R. § 1.111 (8 pages)
- (e) Fee Transmittal Sheet (1 page)



Richard T. Girards, Jr., Esq. (Reg. No. 52,946)

DATE SIGNED: 28 September 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Application of: HARIRI, Robert J.

Confirmation No.: 2020

SEP 28 2005

Serial No.: 10/779,369

Art Unit: 1651

Filed: February 13, 2004

Examiner: Barnhart, Lora Elizabeth

For: USE OF UMBILICAL CORD
BLOOD TO TREAT
INDIVIDUALS HAVING A
DISEASE, DISORDER OR
CONDITION

Attorney Docket No: 9516-141-999

FEE TRANSMITTAL SHEET

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

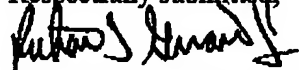
Sir:

The fee required to be filed with the accompanying amendment of even date herewith concerning the above-identified application has been estimated to be \$0.00.

The claim amendment fee has been estimated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)		<input type="checkbox"/> SMALL ENTITY		<input checked="" type="checkbox"/> OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID		PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	26	MINUS	28	2	x 25	\$		x 50	\$ 0.00
INDEP.	2	MINUS	3	0	x 100	\$		x 200	\$ 0.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						\$		\$	0.00
TOTAL						\$	OR	TOTAL	\$ 0.00

Respectfully submitted,


Date 28 September 2005

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